

# AGMAMITO GROUP

-----  
(city, date)

-----  
(company name)

-----  
(company address)

Complaint No. \_\_\_\_\_

(completes by Agmamito)

-----  
(contact person: name, surname, telephone number, e-mail)

## COMPLAINT/RETURN FORM\*

Fabric name: \_\_\_\_\_

Fabric LOT No:<sup>1</sup> \_\_\_\_\_

Delivery document: \_\_\_\_\_ from the day: \_\_\_\_\_

Invoice no: \_\_\_\_\_ from the day: \_\_\_\_\_

The quantity delivered: \_\_\_\_\_ m/pcs.

The quantity complained: \_\_\_\_\_ m/pcs.

### REASON FOR THE COMPLAINT/RETURN

**NOTE: A NECESSARY CONDITION IS TO ATTACH PHOTOS SHOWING THE DEFECT / REASON FOR RETURN**

#### Expected method of settling the complaint (SELECT AS APPLICABLE)

1. Payment refund
2. Exchange of the fabric for a new one free from defects

**NOTE: RECEIPT OF THE FABRIC IS NOT CONSIDERABLE WITH THE ACCEPTANCE OF THE COMPLAINT**

<sup>1</sup> Please keep the barcodes on the fabrics, they are the basis for considering the complaint.

\* Delete as appropriate

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(signature)

